PAGE 03

PTO/SB/81 (09-03) Approved for use through 11/30/2005, OMB 0651-0035 U.S. Patent and Tredemark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a polisation of information unless it displays a valid OMB control number.

Application Number Filing Date POWER OF ATTORNEY First Named Inventor RABENOLD, Nancy J. Title **CORRESPONDENCE ADDRESS** AUTOMATED CONDITION EVALUATOR **Art Unit** INDICATION FORM **Examiner Name** Attorney Docket Number 01004.1030 I hereby appoint: Practitioners associated with the Customer Number. 35856 Practitioner(s) named below: Name Registration Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please recognize or change the correspondence address for the above-identified application to: The address associated with the above-mentioned Customer Number. OR The address associated with Customer Number, OR Firm or Individual Name Address Address City State Ζlp Country Telephone am the: **| √** | Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or Assignee of Record Name Nancy J. RABENOLD Signature alcenato YLLAREL March 29, 2004 Telephone 11 x 1887 -160 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. *Total of 2

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and authoriting the completed application from to the USPTO. Time will vary depending upon the Individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

forms are submitted.

If you need assistance in completing the form, call 1-80p-PTO-9199 and select option 2.

PAGE 02 PTC/GB/81 (09-03)
Approved for use through 11/30/2005, OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a pollection of information unless it displays a valid OMB control number Application Number Filing Date POWER OF ATTORNEY First Named Inventor RABENOLD, Nancy J. Title **CORRESPONDENCE ADDRESS** AUTOMATED CONDITION EVALUATOR **Art Unit** INDICATION FORM Examiner Name Attorney Docket Number 01004.1030 I hereby appoint: Practitioners associated with the Customer Number. 35856 Practitioner(s) named below: Name Registration Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please recognize or change the correspondence address for the above identified application to: The address associated with the above-mentioned Customer Number. OR The address associated with Customer Number: OR Firm or Individual Name Address Address City State Zip Country Telephone Fax am the: V Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or Assignee of Record Name James A. SIMMONS Signature March 29, 2004 Telephone

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application from to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple

forms if more than one signature is required, see below."

forms are submitted.

"Total of 2

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

7881 x 12

PTO/SB/01 (08-03) Approved for use through 07/31/2006, OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Penerwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid QMB control number. Attorney Docket Number 01004,1030 DECLARATION FOR UTILITY OR First Named Inventor DESIGN RABENOLD, Nancy J. PATENT APPLICATION COMPLETE IF KNOWN (37 CFR 1.63) Application Number Filing Date Declaration Declaration March 29, 2004 Submitted Submitted after initial Art Unit With Initial Filing (surcharge Filipa (37 CFR 1.16 (e)) Examiner Name (beriuper I hereby deciare that: Each inventor's residence, mailing address, and citizenship are as stated below next to their name. I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled: AUTOMATED CONDITION EVALUATOR (Title of the Invention) the specification of which 1 is attached hereto OR was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY) (if applicable). I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amanded by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.58, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filling date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent Inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed. Prior Foreign Application Foreign Filing Date Priority Certified Copy Attached? Country Number(s) (MM/DD/YYYY) Not Claimed Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will very depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. [Page 1 of 2]

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

City

Brandon

PAGE 05

PTO/SB/01 (06-03) Approved for use through 07/31/2003, OMB 0851-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1985, no persons are required to respond to a collection of information unless it contains a valid OMB control number. **DECLARATION** — Utility or Design Patent Application Direct all correspondence to: Customer Number. 35856 Correspondence address below Name Address City State ZIP Country Telephone Fax I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent lesued thereon. NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor Given Name (first and middle [if any]) Nancy J. Family Name or Sumame RABENOLD Inventor's Date alrenold Signature March 29, 2004 Residence: City State Country Citizenship Brandon Florida USA uş Mailing Address 904 Pine Hollow Place City State ZIP Country Brandon Florida 33510 USA NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor Given Name Family Name (first and middle [if any]) James A. SIMMONS or Surname inventor's Date Decen Signature March 29, 2004 Residence: City State Country Citizenship Brendon Florida JSA Mailing Address 1704 Woodwatch Way

[Page 2 of 2]

ZIP

33510

State

Florida

Additional inventors or a legal representative are being named on the 1

Country

supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.

USA